MONO COUNTY ELECTIONS Public Service Request Form

The policy and pricing have changed for all Public Service Requests (effective February 1, 2003). Please complete each section of this form that applies, the Application for Voter Registration Information, and send to the following address along with the proper payment:

Mono County Elections Elections: (760) 932-5537
P.O. Box 237 Email: crobles@mono.ca.gov
Bridgeport, CA 93517 Fax: (760) 932-5531

Master Voter File (Current Voter List)				
Select Sort Sequence- Number 1-6:	Precincts to Include:			
()City	() Precincts 1-13 \$50.00			
() Precinct	() Individual Precincts \$10.00 ea			
()Party	List Here:			
() Reg. Name() Street() Zip Code	1- Antelope 7- Long Valley 2- Benton 8- Ma. Meadow 3- Bridgeport 9- Ma. Minaret 4- Chalfant Valley 10- Ma. Pinecrest 5- June Lake 11- Swall Meadows (mail)			
Registration Dates:	6- Lee Vining (mail) 12- Ma. View 13. Old Mammoth			
() From/ () To/ () All (thru present date)	Export File Format (specify one): () DBF () MOD () TXT () WKS () WRK () DIF () SDF () WK1 () WR1 () XLS			
() Paper Printout Preferred Do Not Complete Export File Format	Specify: () Tab Delimited () Comma Delimited			

Voter History File					
Select Sort Sequence- Number 1-6:	Precincts to Include:				
() City	() Precincts 1-13 \$50.00				
() Precinct	() Individual Precincts \$10.00 ea				
() Party	List Here:				
() Reg. Name () Street () Zip Code Election Specification:	1- Antelope 7- Long Valley 2- Benton 8- Ma. Meadow 3- Bridgeport 9- Ma. Minaret 4- Chalfant Valley 10- Ma. Pinecrest 5- June Lake 11- Swall Meadows (mail) 6- Lee Vining (mail) 12- Ma. View 13. Old Mammoth				
() All Elections in System	Export File Format (specify one):				
() Paper Printout Preferred Do Not Complete Export File Format	() DBF () MOD () TXT () WKS () WRK () DIF () SDF () WK1 () WR1 () XLS Specify: () Tab Delimited () Comma Delimited				

Absentee	Reporting	
Select Sort Sequence- Number 1-6: Precincts to Include:		
() City	() Precincts 1-13 \$50.00	
() Precinct	() Individual Precincts \$10.00 ea	
() Party	List Here:	
() Reg. Name	1- Antelope 7- Long Valley	
() Street	2- Benton 8- Ma. Meadow	
() Zip Code	3- Bridgeport 9- Ma. Minaret 4- Chalfant Valley 10- Ma. Pinecrest 5- June Lake 11- Swall Meadows (mail)	
Election Specification:	6- Lee Vining (mail) 12- Ma. View	
() Primary 2002	13. Old Mammoth	
() General 2002	Export File Format (specify one):	
() donoral 2002	() DBF () MOD () TXT () WKS () WRK	
() Paper Printout Preferred	() DIF () SDF () WK1 () WR1 () XLS	
Do Not Complete Export File Format	Specify: () Tab Delimited () Comma Delimited	
	- Commercial () commercial ()	
	ables (no charge)	
() Districts with Precinct Assignments	() Precincts	
() Polling Places	() Election Districts List	
() Precincts with District Assignments	() Election District Groups	
Shipping Specification	Notes	
 By regular first-class mail 		
□ Fed-Ex (envelope/acct provided)		
□ Email – Specify Email address		
Application for Voter R	egistration Information	
Pursuant to Elections Code Section 2187, available to persons or groups for elegovernment purposes as determined by the purchase, or use voter registration informapplication.	ection, scholarly, journalistic, political, o e Secretary of State. All requests to view	
Contact Name:	Phone	
Business Name:		
Drivers License Number:	State Expiration	

YOU MUST ATTACH A COPY OF YOUR DRIVERS LICENSE TO THIS APPLICATION

Your r	residence address			
City _		_State	_ Zip	_ Phone
Busin	ess address			
City _		_ State	_ Zip	_ Fax
Signe	d this day of	, 200	_	
Autho	rizing Signature for Inform	nation	_	
	I intend to			
	() View the Voter Infor() Purchase Voter Info		County Election	ons Division
	The intended use for this			
terminal for elect informat agency, official.	s, electronic data processing tape ion, scholarly, journalistic, politication (or portion or copy thereof) without first receiving written au	es, or disks, printe I, or governmenta will not be sold, athorization to do	ed labels and/or comp al purposes as detern leased, loaned, or g so from the Secret	egistration or derived from computer outer-printed listings will be used only nined by the Secretary of State. The given to any person, organization or ary of State or the county elections ue and correct under the laws of the
Date:		Place		
Signa	ture (full name)			

Send complete application, fee(s) for information, and copy of your driver's license to the following address (questions, call (760) 932-5537):

Mono County Elections Division Attn: Christy Robles P.O. Box 237 Bridgeport, CA 93517